

DEQ AIR QUALITY PROGRAM 1410 N. Hilton, Boise, ID 83706 For assistance, call the Air Permit Hotline – 877-5PERMIT

PERMIT TO CONSTRUCT APPLICATION

Revision 1 01/11/07

Please see instructions on page 2 before filling out the form.

C	OMPANY	NAME, FACILITY NAME, AND FACILITY ID NUMBER	₹	
1. Company Name VANCO READY MIX L.L.C. 2. Facility Name 3. Facility ID No. APPLIED FOR				
2. Facility N	Name	3. Facility ID No. APPUR	D FOR	
Brief Pro One senten	oject Descrip ice or less			
		PERMIT APPLICATION TYPE		
		New Source at Existing Facility Unpermitted Existing Sou	rice	
		Source: Permit No.: Date Issued:	1	
		orcement Action: Case No.:		
6. A Mino	or PTC	Major PTC FORMS INCLUDED		
		LOVING IMCEORER	DEQ	
Included	N/A	Forms	Verify	
130		Form GI – Facility Information		
		Form EU0 – Emissions Units General		
		Form EU1 - Industrial Engine Information Please Specify number of forms attached:		
		Form EU2 - Nonmetallic Mineral Processing Plants Please Specify number of forms attached:		
	X	Form EU3 - Spray Paint Booth Information Please Specify number of forms attached:		
		Form EU4 - Cooling Tower Information Please Specify number of forms attached:		
		Form EU5 – Boiler Information Please Specify number of forms attached:		
	X	Form HMAP – Hot Mix Asphalt Plant Please Specify number of forms attached:		
X		Form CBP - Concrete Batch Plant Please Specify number of forms attached:		
		Form BCE - Baghouses Control Equipment		
		Form SCE - Scrubbers Control Equipment		
		Forms EI-CP1 - EI-CP4 - Emissions Inventory- criteria pollutants (Excel workbook, all 4 worksheets)	. 🔲	
132		PP Plot Plan		
		Forms MI1 – MI4 – Modeling (Excel workbook, all 4 worksheets)		
		Form FRA – Federal Regulation Applicability		

Date Received
RECEIVED
FEB 0 9 2007
Department of Environmental Quality State Air Program
Project Number
Payment / Fees Included?
Yes ☑ No ☐
Check Number
#1026 - \$1,000 app

DECLUSE ONLY

RECEIVED

FEB 0 9 2007

Department of Environmental Quality State Air Program



DEQ AIR QUALITY PROGRAM 1410 N. Hilton, Boise, ID 83706 For assistance, call the Air Permit Hotline – 877-5PERMIT

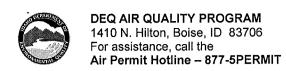
PERMIT TO CONSTRUCT APPLICATION

Revision 1 01/11/07

Please see instructions on page 2 before filling out the form.

All information is required. If information is missing, the application will not be processed.

	IDENTIFICATION			
1. Company Name	VANCO READY MIX L.L.C			
2. Facility Name (if different than #1)	,			
3. Facility I.D. No.	APPLIED FOR			
4. Brief Project Description:	READY MIX CONCERTE FUR DRY CREEK DAIRY CONSTRUCTS			
	FACILITY INFORMATION			
5. Owned/operated by: (√ if applicable)	Federal government County government State government City government			
6. Primary Facility Permit Contact Person/Title	KRUY VANCE / OWNER			
7. Telephone Number and Email Address	(208) 327-391 KVANKE @ DAIRY PLANS. COM			
8. Alternate Facility Contact Person/Title	KELLY KINCAID / PLANT MANAGER			
9. Telephone Number and Email Address	(208) 280-1616 KKINCAID @ VANCOREADY MIX. COM			
10. Address to which permit should be sent	7.0. BOX 7			
11. City/State/Zip	HOMEDALE, IDAHO 83628			
12. Equipment Location Address (if different than #9)	4200 E 2900 S \$			
13. City/State/Zip	HANSON, IDAHO 83334			
14. Is the Equipment Portable?	Yes No			
15. SIC Code(s) and NAISC Code	Primary SIC: 3273 Secondary SIC (if any): NAICS: 327320			
16. Brief Business Description and Principal Product	READY MIX PORTABLE BATCH PLANT			
17. Identify any adjacent or contiguous facility that this company owns and/or operates				
	PERMIT APPLICATION TYPE			
18. Specify Reason for Application	New Facility Modify Existing Source: Permit No.: Date Issued: Unpermitted Existing Source: Required by Enforcement Action: Case No.:			
	CERTIFICATION			
IN ACCORDANCE WITH IDAPA 58.01.01.123 (F AFTER REASONABLE INQUIRY	RULES FOR THE CONTROL OF AIR POLLUTION IN IDAHO), I CERTIFY BASED ON INFORMATION AND BELIEF FORMED T, THE STATEMENTS AND INFORMATION IN THE DOCUMENT ARE TRUE, ACCURATE, AND COMPLETE.			
19. Responsible Official's Name/Title	L. ELLY VANKE			
20. RESPONSIBLE OFFICIAL SIGNATURE Date: 2/8/07				
21. Check here to indicate you would	d like to review a draft permit prior to final issuance.			



PERMIT TO CONSTRUCT APPLICATION

Revision 1 01/11/07

Please see instructions on page 4 before filling out the form.

GENERAL INFORMATION

Company Name:	VANCO READY MIX, E.L.C.			
Facility Name:	,	Facility ID No: APPUED FOR		
Brief Project				
Description:	PORTABLE CONCETE ELADY	MIX PLANT		
Mailing Address:	P.O. 60x 7			
City:	HOMEDALE	State: TOAHO		
Zip Code:	83628	County: OWY HEE		
General Nature of Business & Products:	SUPPLY READY MIX CONC.	PETE FOR DAIRY CONSTRUCTION PROJECTS		
Business & Floudets.	Collag Realpy Mill Collect	COE POID BHILD CONSTRUCTION TO THE		
Contact Name, Title:	KELLY VANCE / OWNE	6 11 251 5351		
Phone:	(238) 33743/9/	Cell: (208) 250-5351		
Email:	KVANCE & VANCO READY MIX	Com		
Owner or Responsible	V			
Official Name, Title:	Kerry vance / owner			
Phone:	(208) 337-391			
Email:	KUANCE P VANCO READY M.	ViCam		
Proposed Initial Plant	1100-1-000-			
Location:	4200 € 2900 S	<u> </u>		
Nearest City:	HAUSEN FOAHO	Estimated		
County:	TWIN FAUS	Startup Date: 3/15/07		
Reason for	Permit to construct a new source			
Application:	Permit to operate an existing unpermitted so	ource		
	Permit to modify/revise an existing permitted			
	Permit No.:			
	Assistant Samuel Control of the Cont			
	Facility ID:			
	te you would like to review a draft permit prior to			
Comments: 211	T HAS OPERATED SINCE WE	E PURCHASED IT IN 2002 IN		
	CI A INCAL LIE HAD D	E a. PERMIS. RECEDICY MOVE		
UREOUN & CH	IN THE CHAP IN PURCE	WHILE WE WERE WAITING TO		
PLANT TO IDAMO TO ONE SHOP IN BURNEY WHILE WE WERE WAITING TO SET UP PLANT ON JUBSITE IN HANSEN, IDAMO, PLANT IS NOT ERECTED IN BURNEY,				
SET UP PLANT	on tub site in Hansen, 1044	10. 1 - 45		
-	11.11 5-1260 -1/2PE			

IT'S JUST BEING STORED THERE.

CONCRETE BATCH PLANT INFORMATION

1. Concrete Batch Plant

Manufacturer:	CONE	Model: LOPEU 427
Manufacture Date:	200	2
Maximum Hourly Thr	oughput:	200 (cy/hour)
Maximum Daily Throughput:		/💓 (cy/day)
Maximum Annual Throughput:		7580 (cy/year)
Requested Annual Throughput:		7.5000 (cy/year)

2a. Cement Storage Silo Baghouse No. 1

Manufacturer: Con	/ECU	Model: PJC 3005
Stack Height from Ground:	(ft) 50 EST.	Exit Air Flow Rate: 1520 (acfm) CFM
Stack Inside Diameter:	(ft) x 54"x54"	* PM ₁₀ Control Efficiency: 99.9 (%)
* Manufacturer Grain Loadin	g Guarantee:	
* Attach manufacturer's PM ₁₀	control efficiency if available.	

2b. Cement Storage Silo Baghouse No. ____

Manufacturer:		Model:			
Stack Height from Ground: (ft)		Exit Air Flow Rate:	(acfm)		
Stack Inside Diameter:	(ft)	* PM ₁₀ Control Efficiency:	(%)		
* Manufacturer Grain Loading Guarantee:					
* Attach manufacturer's PM ₁₀ control efficiency if available.					

2c. Cement Supplement (such as flyash) Storage Silo Baghouse No. 2

it Air Flow Rate: 1500 CFM (acfm) /0/0
80° C
PM ₁₀ Control Efficiency: 99.9 (%)
_

2d. Cement Supplement (such as flyash) Storage Silo Baghouse No. 3

Manufacturer: (6)	heco	Model: 20-250			
Stack Height from Ground:	28 (ft) EST.	Exit Air Flow Rate:	CFM(aefm)	1010	
Stack Inside Diameter:	(ft) 41"×41"	* PM ₁₀ Control Efficiency: ^C	79.9 (%)		
* Manufacturer Grain Loading Guarantee:					
* Attach manufacturer's PM ₁₀ c	control efficiency if available.				

3. Weigh Batcher Baghouse(s)

Manufacturer:	CONECO	Model: 3-14		
Stack Height from (Ground: 20 (ft)	Exit Air Flow Rate: (acfm)		
Stack Inside Diameter: (ft)		* PM ₁₀ Control Efficiency: (%)		
* Manufacturer Gra	in Loading Guarantee:	DISCHARLE CLOSED		
* Attach manufacture	er's PM ₁₀ control efficiency if availat	ole.		

ELECTRICAL GENERATOR SET INFORMATION (IF APPLICABLE)

Manufacturer:				Model:	
Maximum Rated Capacity:			☐ Hp	□kW	
Fuel Type:		☐ Gasoline	☐ Diesel	☐ Natural Gas ☐ Propane	
Maximum Fuel Usage Ra	ate:		gal./hr.	☐ cfh	
Maximum Daily Hrs. of C		(hours/	day)		
Maximum Annual Hrs. o	f Operations:	(hours/	year)		
Stack Parameters:	Stack Height f	rom Ground (ft):		Stack Exhaust Flow Rate (acfm):	
	Stack Insid	de Diameter (ft):		Stack Exhaust Gas Temperature (°F):	
ADDITIONAL GENERA	TOR (if appl	icable)			
Manufacturer:		1		Model:	
Maximum Rated Capacit	y:		□ Нр	□ kW	
Fuel Type:		Gasoline	Diesel	☐ Natural Gas ☐ Propane	
Maximum Fuel Usage Ra	ite:		gal./hr	cfh	
Maximum Daily Hrs. of C	perations:	(hours	/day)		
Maximum Annual Hrs. o	Operations:	(hours	/year)		
Stack Parameters:	_	rom Ground (ft):		Stack Exhaust Flow Rate (acfm):	
	Stack Inside Diameter			Stack Exhaust Gas Temperature (°F):	
\$1,000 PTC application fee enclosed					
Certification of Truth, A I hereby certify that base contained in this and any IDAPA 58.01.01.123-124 Responsible Official Signature Key Vauce Print or Type Responsible Office	d on informatio attached and/	n and belief for or referenced d	med after re	easonable inquiry, the statements and information are true, accurate, and complete in accordance with $2 / 9 / \delta 7$	



Department of Environmental Quality 1410 N. Hilton Boise, ID 83706

For assistance, call the Air Permit Hotline: 1-877-5PERMIT

DEQ - AIR QUALITY PROGRAM PORTABLE FOUIPMENT RELOCATION FORM

		TONTABLE EQUITMENT RELOCATION FORM			
Comp	any Name	VANCO READY MIX, LLC			
Phone	Phone Number: (208) 250-535				
Mailir	Mailing Address: POBOX7 - HOMEDALE, TOAHO 83628				
Conta	ict:	· UY VANCE			
Signa		Date: 2/9/07			
L	1				
Plant	Туре				
(HMA	, Rock Crus	sher, Mfr., Model No.) CBP - CONECO LOPRO 427			
		Permit to Construct or (Yes) No If Yes, Facility ID:			
		Permit by Rule Yes No If Yes, Facility ID:			
Fuel	Гуре for Ge				
		components of the plant or its air pollution equipment been replaced or modified since the			
plant	last operat	ed? Yes No If Yes, attach explanation on additional paper.			
İ		, include county and nearest city: BURISH (NOT ERECTED) CASIA			
	·····	IP Date: 3/15/07 HANSEN, TWINFAUS CO. 4200 E 2900S Estimated End Date: 9/30/08			
		, -			
(mon	th/day/yea	r) (month/day/year)			
Will P locati		ocated with another rock crusher, concrete batch, or hot-mix asphalt plant at new Yes			
	Name of 0	Other Company:			
If Yes	TIVE OFFICIAL TRUCK CLUSHEF TO CONCICLE DATOR THE PROPERTY				
103	Type of	Permit to Construct Yes No If Yes, Facility ID: or Operating Permit			
	Permit	Permit by Rule Yes No If Yes, Facility ID:			
	<u> </u>				
Will p	Will plant be operated in conjunction with a state of Idaho contract? Yes No				
If	Contract I				
Yes	State of I Phone Nu	daho Contact Person:			
	i none nu	TIDEL.			

THIS FORM MUST BE SUBMITTED TEN (10) DAYS BEFORE PLANT IS RELOCATED.

A scaled plot plan identifying the property boundary of the new site must be included with this form (see Permit Application Form PP-Plot Plan for guidance).

Mail to:

Air Quality Program Office - Application Processing

Department of Environmental Quality

1410 North Hilton Boise, ID 83706-1255

Or, Fax to: 208-373-0340

Attn: Air Quality Program Office - Application Processing

VANCO READY MIX, U.C. PLANT #100 OWNER PLANS TO TEAR HOUSE TO TEAR HOUSE TO 24'x48' CBP BUILDING #1: 15 AN EXISTING
ADUSE WITH NO LIVING THEER. LOAD OUT ON WEST ENO OF BATCH FLAUT.

BATCH PLAUT 15 12 WIDE)

TS' WILL WHEN SET UP. APPLICATION PTC BATCH PLAUT. TRUCKS #7: Consco Law Peo 427 #3. 2900-5 -G l 1# 乙炔 1 3 onet 900'

FEES RECEIVED FROM FACILITY

Facility Name	VANCO BEADY MIX
Facility Location	HANSEN, JD.
Fee Type	\$ 1,000 APPFEE, \$ 1,000 PROC. FEE
Check Number	1026
Check Date	2/9/07
Check Amount	12000

RECEIVED FEB 0 9 2007

Department of Environmental Quality State Air Program